



## SPECIAL INSPECTION SCHEDULE POST WITH BUILDING PERMIT ON JOBSITE

|                 |   |
|-----------------|---|
|                 | Building Inspection Supervisor / (425) 452-4570 |
| Project Name    | City Contact/ Phone #                           |
| Project Address | Structural Engineer / Phone #                   |
| Permit Number   | Architect / Phone #                             |

Prior to issuance of a building permit, the owner or an authorized agent shall appoint an inspection agency and inform the Plans Examiner of that selection.

|  |         |         |                          |
|--|---------|---------|--------------------------|
| Name and Title of Authorizing Party<br>(Indicate Whether Owner or Agent) | Phone   | Date    | Plans Examiner / Phone # |
| Inspection Agency  | Address | Phone # |                          |

The party named above has stated that the designated inspection agency has been engaged to perform the special inspection outlined below as required by Section 1701 of the Uniform Building Code (UBC). Selection of the inspection agency **cannot be changed** once the building permit has been issued, **except** with the specific permission of the Building Official.

**PRECON MEETINGS MAY BE REQUIRED.** The City of Bellevue Building Inspector must be contacted in advance of any work noted below. It is the responsibility of the owner or owner's designee to notify the inspection agency **AND** schedule a building inspection in a timely manner when the inspections indicated below are required. Copies of all inspection reports must be posted on site and summary letters submitted to the Building Inspection Supervisor. Unresolved nonconformancies must be brought to the immediate attention of the Building Inspector. Send summary letters and nonconformance reports to Building Inspection Supervisor, Planning & Community Development, 301-116<sup>th</sup> Ave. SE, Suite 405, P.O. Box 90012, Bellevue, WA 98009-90122. Refer to the City of Bellevue Special Inspection Manual for additional requirements and definitions.

### RESIDENT SPECIAL INSPECTOR REQUIRED

#### REINFORCED CONCRETE\*

|  |   |
|--|---|
| <input type="checkbox"/> Cast in place (>2500 psi) _____<br><input type="checkbox"/> High Strength (>4000 psi) _____<br><input type="checkbox"/> Batch Plant Inspection _____<br><input type="checkbox"/> Augur Cast Piles (Grout/Rebar/Flow Test) _____<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Ductile Frame _____<br><input type="checkbox"/> Post-Tensioned (Tendon Placing/Stressing/Elongation) _____<br><input type="checkbox"/> Precast Erection _____<br><input type="checkbox"/> Prestressed Panel Erection _____<br><input type="checkbox"/> Shotcrete _____ |
|--|---|

#### STRUCTURAL STEEL

|   |  |
|---|--|
| <input type="checkbox"/> Fabrication _____<br><input type="checkbox"/> Field Welding _____<br><input type="checkbox"/> Nondestructive Testing of Welds _____<br><input type="checkbox"/> Erection _____ | <input type="checkbox"/> Steel Decking _____<br><input type="checkbox"/> High Strength Bolting _____<br><input type="checkbox"/> Spray Applied Fire Proofing _____<br><input type="checkbox"/> Other _____ |
|---|--|

#### REINFORCED MASONRY

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Continuous _____<br>Strength Established By:<br><input type="checkbox"/> Prism Tests _____ | <input type="checkbox"/> Periodic (See S.I. Manual) _____<br><input type="checkbox"/> Field Experience _____ | <input type="checkbox"/> Other _____<br><input type="checkbox"/> Table 21-D _____ |
|---|--|---|

#### MISCELLANEOUS

|   |   |
|---|---|
| <input type="checkbox"/> Seismic Tie Installation _____<br><input type="checkbox"/> Curtain Wall Erection _____<br><input type="checkbox"/> Epoxy Bolt Installation _____ | <input type="checkbox"/> Anchor Bolt Installation _____<br><input type="checkbox"/> Expansion Anchor Installation _____<br><input type="checkbox"/> Other _____ |
|---|---|

\*Submit design mix or provide minimum cement content

12/19/01